U.S. Department of Labor of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Fallure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only		
READ THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT.	
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- Company of the comp		
1. File Number U -	2. Fiscal Year Covered From:	
	Through: Z	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name A LACE A LA	Name UAGU LOCAC 111075	
	Labor Organization File Number	
P.O. Box, Bldg., Room No., If any	P.O. Box, Building and Room Number, if any	
Street Average	Street 6 6 55 THE SALEY FILES	
City	City	
State ZIP Code + 4	State	
5. Position in labor organization.		
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	7.b. Amount.	
Street	7.D. Amourt.	
City		
State ZIP Code + 4	An annual test total and represented \$1000000000000000000000000000000000000	
Signature		
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information		

submitted in this report/including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct and complete. (See the section on penalties in the instructions.)

Signed

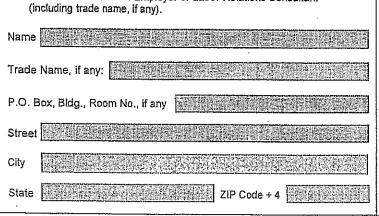




B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

	 	
8. Name and address of Business (including trade name, if any).	9. Business deals with:	_
Name		
Trade Name, if any:	a. Labor Organization b. Trust	
P.O. Box, Bldg., Room No., if any		
Street Engineering Committee Committ	c. Employer	
City City		
State ZIP Code + 4		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	,
Name Park The Park Th		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street Street	11.b. Approximate dollar value of such dealing.	
City	12.a. Nature of interest held or income received.	The same the sequent of the sequent
State ZIP Code + 4 S D Code		
	12.b. Amount.	

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.



13.a. Name and address of Employer or Labor Relations Consultant

14.a. Nature of payment.

or Consultant



14.b. Amount of payment.

